

*STATE OF DELAWARE*  
*Department of Services for Children, Youth, and Their Families*  
*Division of Child Mental Health Services*

# *Clinical Services*



## *Child/Family Handbook*

*For Child/Family Entering Care in the Division of Child Mental Health Services (CMHS)*

### *VISION*

*Children and families reaching  
their fullest potential*

### *MISSION*

*To provide accessible, effective treatment  
for children through collaboration with  
families and service providers*

For more information: <http://www.kids.delaware.gov>

January 2007

# ***Table of Contents***

1. What To Do In A Mental Health/Substance Abuse Emergency	1
2. Department of Services For Children, Youth, and Their Families Overview	2
3. Division of Child Mental Health Service Network	3
4. Child and Family Rights	4
5. CMH Responsibilities	4
6. Child and Family Responsibilities	4
7. Client Confidentiality	5
8. CMH Client Appeal Procedure	6
9. Advocacy Resources and Information	7-8
10. Agreement of Understanding between CMH and Parent/Guardian Entering Services (Client Copy)	9
11. Agreement of Understanding between CMH and Parent/Guardian Entering Services (CMH Copy)	10
12. HIPAA notification letter	11



# What to do in a mental health or substance abuse emergency:

First: *If immediate medical or police assistance is needed*

**\*\*Call 911\*\***

Then: *If the emergency is during office hours:*  
(8:00 am-4:30 pm, Monday through Friday)

- **Call your mental health/substance abuse service provider or follow the guidelines they have given you regarding services in an emergency.**

**OR**

*If the emergency is after office hours or during the weekend*

- **Call the CMH Crisis Service:**

New Castle County  
(North of the C&D Canal)

(302) 633-5128

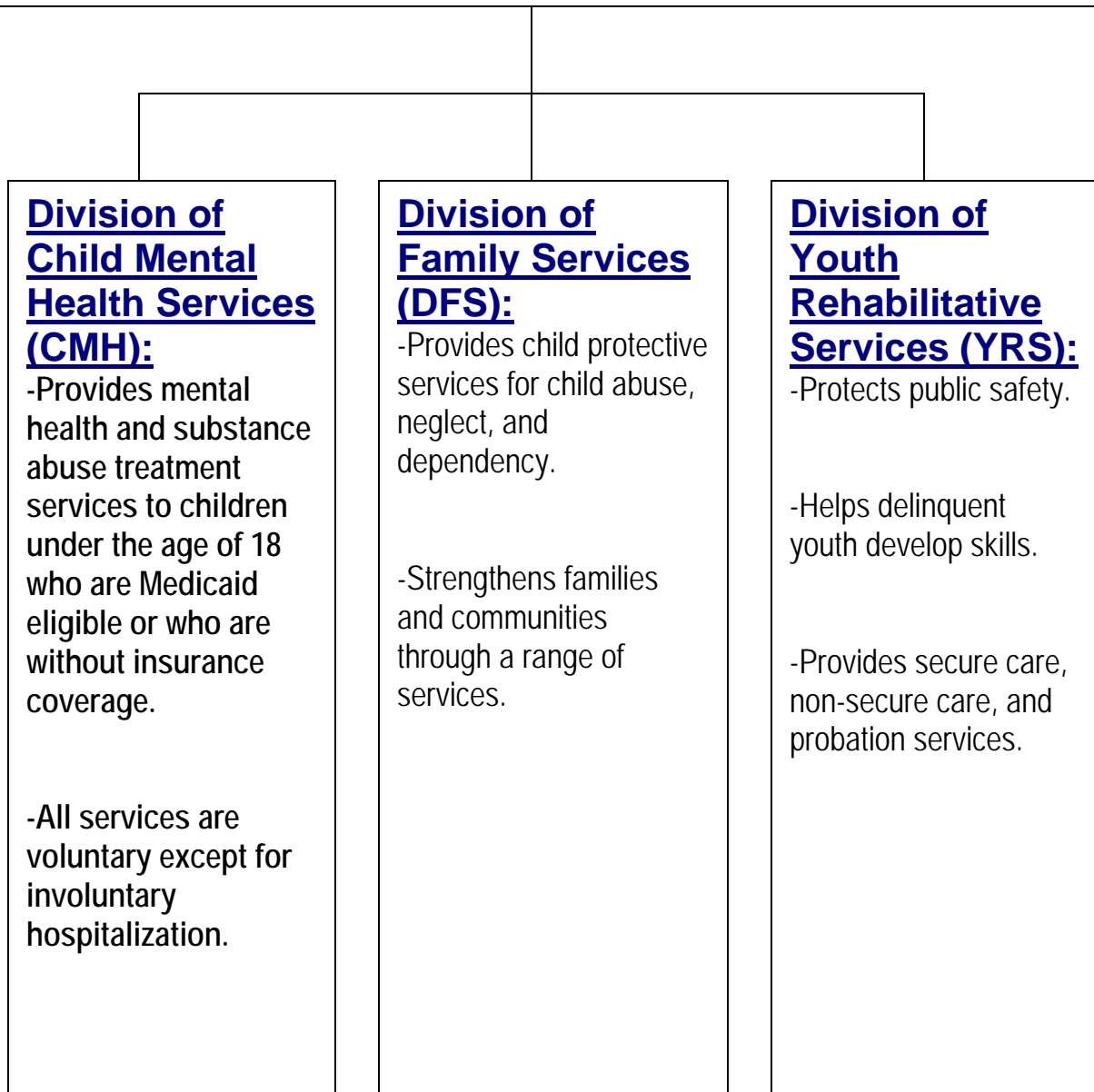
New Castle County  
(South of the C&D Canal)

1-800-969-HELP (4357)

Kent and Sussex Counties

(302) 424-HELP (4357)

# Department of Services for Children, Youth, and Their Families



## *Division of Child Mental Health Service Network*

The CMH Services Network is composed of state-wide, private and public treatment providers providing a range of mental health/substance abuse treatment services which focus on **family strengths, are individualized, least restrictive, culturally competent, and clinically appropriate.**



Crisis Services  
Outpatient Services  
Wraparound Services  
Intensive Outpatient Services  
Part-Day Treatment  
Day Treatment/Hospital  
Individualized Residential Care  
Residential Treatment  
Psychiatric Hospital

Less Intensive Services



More Intensive Services

## *Clinical Services Management Team (CSMT)*

*Your CSMT will assist you with every step of the treatment process. The CSMT consists of:*

- Treatment Team Leader-a Licensed Behavioral Healthcare Professional
- Psychiatric Social Worker
- Clinical Services Coordinator
- Family Services Assistant

*The Clinical Services Coordinator is the person who is primarily responsible for coordinating the services and supports your family receives.*

*As your Clinical Services Coordinator, I will....*

- Guide you through every step of your child's treatment
- Work with you to decide what treatment is most useful in your situation
- Locate a treatment service provider and assist with arranging for your child to begin treatment services
- Review your child's progress throughout treatment
- Help coordinate treatment services with others, for example: schools, your physician, and other agencies
- Plan with you for what happens after treatment is completed

My Clinical Services Coordinator is \_\_\_\_\_

Telephone Number \_\_\_\_\_ Monday-Friday 8:00 am – 4:30 pm

## What CMH Offers Families

- You have the right to access treatment that is individually tailored to your family's unique needs, regardless of race, religion, gender, ethnicity, age or disability. You have the right to have these services provided in the least restrictive environment possible.
- You have the right to guide decision-making regarding your child's treatment and to file an appeal or make a complaint at any step of the way (page 6 cover this in more detail).
- You have the right to be treated fairly and with respect. The Division of Child Mental Health Services works to respect your family's cultural and personal beliefs.
- You have the right to confidentiality of information pertaining to your child and family (For information about confidentiality, see page 5).
- You have the right to have the therapist explain the treatment that will be used to help your child and agree to this plan (informed consent).

## What CMH Would Like from Families

- We would like you to guide decisions regarding the supports and services for your child and family. This includes things such as school meetings, treatment planning, court activities, etc.
- We need you to provide clinical, family, school and health care information as well as financial and insurance information to us.
- We would like you to understand your financial responsibilities.  
Where families are to pay part of the cost of their child's behavioral healthcare services, this will be explained before services start. No Medicaid clients are required to make co-payments for any services.
- We would like you to participate in therapy sessions and to work on therapy problems at home.



## How CMH Can Help You

- Provide information and referral for those who do not require or qualify for CMH services.
- Work with the family to identify strengths and determine appropriate treatment
- Provide case coordination for you and your family while receiving CMH services. Coordinators will work closely with you, treatment providers, other agencies, and schools with the goal of coordinating the services your child needs.
- Make every effort to provide services to help children and youth remain in their communities.

## *Client Confidentiality*

*The Division of Child Mental Health Services appreciates the opportunity to provide behavioral healthcare services to you and your child. In order to provide the best possible services to you and your family, we must obtain, use, and disclose personal information. We understand that this information is private and confidential; thus, we have policies in place to protect this information against unlawful use and disclosure. You will receive a copy of the Department of Services for Children, Youth, and their Families Notice of Privacy Practices from the Clinical Services Management Team. This pamphlet describes how medical information about you or your child may be used and disclosed and how you can get access to this information.*

*You can also review this notice on our website at: <http://www.state.de.us/kids/>*

### Below is general information about our confidentiality practices:

- We operate on a "need to know" basis. CMH, other Departmental staff, and treatment providers only can learn information about your family that is necessary to complete their tasks related to serving you and your family.
- Confidential information will not be released beyond Department care managers without your written permission. Once you start a treatment program CMH and the service provider can discuss your progress.
- There is some information that, by law, is not confidential. This includes suspected abuse/neglect or threats to harm self or others.
- Information about substance abuse problems, HIV status, pregnancy and sexually transmitted diseases have special, strict rules regarding confidentiality. Children older than 12 years may be required to consent to the release of such information.
- You should be aware that the Department has a computerized client information system (FACTS) in which data is stored. This electronic information is protected by computer access and security procedures.

*If you have questions about the Notice of Privacy Practices, or you think we have violated your privacy rights, or if you want to make a complaint about our privacy practices, please contact the Privacy Officer at:*

*Andrew Cohen  
Office of Case Management  
1825 Faulkland Road  
Wilmington, DE 19805  
302-633-2528*

## CMH Client Appeal Procedure:

- If you have a complaint about a Treatment Provider:

### Step #1

Complaint is presented to the Treatment Provider. If requested, your coordinator will assist you. If your issue goes unresolved, go to Step #2.

### Step #2

Complaint presented to CMH Director of Clinical Services Management. If your issue is not resolved here, move on to Step #3.

### Step #3

Complaint is taken to CMH Quality Improvement Director, who appoints an Independent Review Panel to consider your complaint/appeal. Decisions made here are final.

- If you have a complaint about CMH or a staff member:

### Step #1

Complaint presented to the Coordinator. If your issue is unresolved, go to Step #2.

### Step #2

Complaint presented to the Team Leader. If your issue is unresolved, go to Step #3.

### Step #3

Complaint presented to CMH Director of Clinical Services Management. If your issue is not resolved here, move on to Step #4.

### Step #4

Complaint is taken to CMH Quality Improvement Director, who appoints an Independent Review Panel to consider your complaint.

Please contact: Lynn Banks, QI Director, Ph: 302-633-2619

\*\*\*\*\*

Consumers receiving Medicaid may appeal to the DHSS Medicaid Office at any time in this process by calling the Health Benefits Manager at 1 (800) 996-9969 or Medicaid Customer Service at 1 (800) 372-2002 or asking for the Fair Hearing Officer\* at (302) 577-4900.

\*DSS Fair Hearing Officer  
1901 N. duPont Highway  
PO Box 906-Lewis Building  
New Castle, DE 19720



## **Advocacy Resources and Information**

**Contact Delaware**—a 24 hour help line answered by a trained volunteer. Call 761-9100 or 1-800-262-9800

### **State Mental Health Agencies:**

For more information about admission, care, treatment, release, and patient follow-up in public or private psychiatric residential facilities, contact your State mental health/substance abuse agencies:

#### **For Children Services:**

Division of Child Mental Health Services  
1825 Faulkland Road  
Wilmington, DE 19805  
Phone: (302) 633-2571  
Website--<http://www.state.de.us/kids/cmhome.htm>

#### **For Adult Services:**

Division of Alcoholism, Drug Abuse and Mental Health  
1901 North duPont Highway  
New Castle, DE 19720  
Phone: (302) 255-9399

Each of these organizations has a complaint process in place and can provide information to families about services through the state agency system.

### **Delaware's Legal Handbook for Grandparents & Other Relatives Raising Children**

A legal resource for people caring for the children of a relative. Free from Delaware Health and Social Service, Div of Srv for Aging and Adults with Physical Disabilities, 1-800-223-9074

### **State Protection and Advocacy Agency**

Each State has a protection and advocacy agency that receives funding from the Federal Center for Mental Health Services. Agencies are mandated to protect and advocate for the rights of people with mental illness and to investigate reports of abuse and neglect in facilities that care for or treat individuals with mental illness. Contact:

Disabilities Law Programs  
100 N. 10<sup>th</sup> Street, Suite 801  
Wilmington, DE 19801  
Phone: (302) 575-0660



### **Advocacy Organizations**

Statewide consumer organizations are run by and for consumers of mental health services and promote consumer empowerment. These organizations provide information about mental health and other support services at the State level and are active in addressing and advocating for mental health system issues. For information about consumer activities in your area, contact:

### **Mental Health Association in Delaware**

100 West 10<sup>th</sup> Street, Suite 600  
Wilmington, DE 19801  
Phone: (302) 654-6833 Fax: (302) 765-9745  
Toll-free (800) 969-6642  
Website--[www.mhainde.org](http://www.mhainde.org) Email--[pgalonsky@mhaninde.org](mailto:pgalonsky@mhaninde.org) or [information@hainde.org](mailto:information@hainde.org)



### **National Alliance for the Mentally Ill in Delaware (NAMI-DE)**

2500 West Fourth Street, Suite 5  
Wilmington, DE 19805  
Phone: (302) 427-0787 Fax: (302) 427-2075 Email--[nami@nami.org](mailto:nami@nami.org)  
Toll-free: (800) 427-2643 (Statewide)

## **Advocacy Organizations (continued)**

### **The Arc/DE (Association for the Rights of Citizens with Mental Retardation in Delaware)**

1016 Centre Road, Suite 1  
Wilmington, DE 19805

Phone: New Castle County—(302) 996-9400  
Kent County—(302) 736-6140  
Sussex County—(302) 856-6019

### **The Division of Developmental Disabilities Services**

Woodbrook Professional Center  
1056 South Governors Avenue, Suite 101  
Dover, DE 19904

### **The Parent Information Center of Delaware (PIC)**

PIC provides: Education Advocacy Training for parents of children with disabilities, information on special education laws and processes, information on the rights and entitlements of persons with disabilities and disability awareness training for schools and communities. In addition, PIC sponsors a Parent-to-Parent Support program with support group meetings to help families cope with a disability in the family. PIC sponsors a statewide conference each year that focuses on issues and topics of interest to families of children with disabilities.

#### **North Delaware**

5570 Kirkwood Highway  
Wilmington, DE 19805  
Phone: (302) 999-7394  
Email--[picofdel@picofdel.org](mailto:picofdel@picofdel.org)

#### **South Delaware**

109 N. Bedford Street  
Georgetown, DE 19947  
Phone: (302) 856-9880  
Toll-free for Families in Kent County: 1-888-547-4412



### **Federation of Families for Children's Mental Health**

A statewide comprehensive system of support/advocacy services for families of children with mental health challenges.  
For information contact:  
Children and Families First  
Phone: 1-800-734-2388

### **Medicaid clients and their families may contact the following for advocacy assistance and information:**

Delaware Medicaid Consumer Hotline: 1-800-372-2022  
Health Benefits Manager: 1-800-996-9969

### **General Information about Children's Behavioral Health Issues**

- The Substance Abuse and Mental Health Services Administration's Center for Mental Health Services-  
[www.mentalhealth.org](http://www.mentalhealth.org)
- The National Institute of Mental Health-[www.nimh.nih.org](http://www.nimh.nih.org)
- The Bazelon Center for Mental Health Law-[www.bazelon.org/children.htm](http://www.bazelon.org/children.htm)
- The Division of Child Mental Health Services-[www.state.de.us/kids/cmhhome.htm](http://www.state.de.us/kids/cmhhome.htm)
- The American Psychological Association-[www.apa.org](http://www.apa.org)
- The American Academy of Child and Adolescent Psychiatry-[www.jaacap.com](http://www.jaacap.com)
- Public Libraries have staff that can assist you in finding information and have computers to access the websites noted above.

## Understanding Between CMH and Parent/Guardian of Child Entering CMH Services

I have reviewed and understand the handbook about how the Division of Child Mental Health works. I understand:

By applying for services with CMH, confidential information about my child and family will be shared according to the conditions outlined in the Department's confidentiality policy. I have the right to a copy of the confidentiality policy, if I request it.

A Clinical Services Management Team will be assigned to work with my child and family. A team member may interview my child to help determine the most appropriate treatment service. Members of this team include the licensed behavioral healthcare professional who leads the team and the Clinical Services Coordinator. The team may include a psychiatrist and other specialists as necessary.

The team will seek my child and family's input for treatment planning, including planning for the next step after treatment is completed.

CMH or persons contracted with CMH may contact me about my child's treatment to determine if my family is satisfied with the care provided.

Finally, I/we understand that my/our participation in the treatment process is essential for my/our child's progress and success. I am aware that my lack of participation may result in the discontinuation of services. I further understand that my family's participation is voluntary, and I can request that services be terminated at any time.

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Child Signature	Child Printed Name	Date
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Parent/Custodian/Guardian Signature	Parent/Custodian/Guardian Printed Name	Date
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Parent/Custodian/Guardian Signature	Parent/Custodian/Guardian Printed Name	Date
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CSMT Coordinator Signature	CSMT Coordinator Printed Name	Date
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Phone Number: (302) \_\_\_\_\_

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CSMT Team Leader Printed Name

Phone Number: (302) \_\_\_\_\_

Client/Family Copy

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CSMT Coordinator Signature	CSMT Coordinator Printed Name	Date
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Phone Number: (302) \_\_\_\_\_

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CSMT Team Leader Printed Name

Phone Number: (302) \_\_\_\_\_

## *Division of Child Mental Health Service*

### **HIPPA NOTIFICATION**

The Health Insurance Portability and Accountability Act (a federal law commonly called "HIPAA") requires that The Department of Services for Children, Youth and Their Families provide you with the attached Notice of Privacy Practices.

Please read this notice. If you have questions, you may speak to Division of Child Mental Health staff or the Department of Services for Children, Youth, and Their Families (DSCYF) Privacy Officer by calling (302) 633-2685.

DSCYF includes, Division of Child Mental Health, Division of Youth Rehabilitative Services, and the Division of Family Services, and so you may receive more than one notice. If you do, all the notices will be the same because DSCYF has only one Notice of Privacy Practices. We just want to be sure that you get the Notice.

Please print your name, your child's name and the date below, and then sign your name to indicate that you have received a copy of the DSCYF Notice of Privacy Practices. Please give this form to a Division of Child Mental Health staff member before leaving the Division of Child Mental Health office today.

Thank you!

On this date I have received a copy of the Notice of Privacy Practices from the Department of Services for Children, Youth, and Their Families.

Your Name (please print) \_\_\_\_\_

Your Signature \_\_\_\_\_

Child's Name \_\_\_\_\_

Date \_\_\_\_\_

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Child's Name \_\_\_\_\_

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